



The Lactational Amenorrhea Method (LAM)

Results and Advocacy

October 2002

Current Issues

The lactational amenorrhea method (LAM) is a modern contraceptive method based on the natural infertility resulting from full or nearly full breastfeeding in the absence of menses in the first 6 months postpartum. Typically used, LAM is more than 98 percent effective.

LAM is the most effective short-term modern method of contraception accessible to all women right after delivery. This safe, affordable birth spacing option is acceptable to women regardless of their religious affiliation or economic status. LAM contributes to the first 6 months of the birth spacing interval. Women who space their pregnancies less than six months have a 2.5 times greater risk of dying from their next pregnancy than those with longer birth intervals.

LAM is also the only modern method of contraception that employs the most effective maternal behavior known to save millions of infant lives every year: breastfeeding.

Despite these attributes, LAM is not fully embraced by family planning program planners and service providers. Several issues have been identified:

- The distinction between breastfeeding and LAM, and between natural family planning and LAM, is misunderstood.
- The contribution this 6 month postpartum method makes to birth spacing and supply-driven contraceptive commodity programs is undervalued.
- The amount of funds and time to train providers and counsel clients is perceived to be too much of an investment for too limited a contraceptive coverage, even though existing LAM program approaches and tools exist to defray initial investments.

LINKAGES' Response

LINKAGES' activities support the objective of strengthening the advocacy of LAM as an effective, modern method that is readily introduced into service delivery programs:

- Current and future LINKAGES program sites will yield important information and results from practical approaches to increase LAM rates.
- USAID's policy and advocacy efforts to mainstream LAM interventions into three of its key reproductive health projects will continue to be facilitated by LINKAGES.
- Findings from LINKAGES' applied research will determine whether LAM can be promoted as an effective "bridging" method to other modern contraceptives after 6 months postpartum.
- Technical and program information will continue to be packaged and disseminated to family planning and maternal and child health planners and service providers.

Program Results

LINKAGES currently works with the Ministry of Health in Jordan, a network of 16 participating NGOs (PROCOSI) in Bolivia, and the Ministry of Health, JSI, and a consortium of 57 local organizations in Madagascar to strengthen infant feeding, and in particular, LAM programming.

To assess program impact, LINKAGES uses the LAM rate—the proportion of eligible women who give birth in a given period of time (infants are less than 6 months old) who consciously and deliberately state they accept LAM as a modern contraceptive method and form of birth spacing.

A combination of policy advocacy, behavior change communication, community support, training, and practical monitoring and evaluation activities over a two-year period (2000-2001) led to the LAM rate doubling in Bolivia and increasing more than 20-fold in Madagascar.

In Jordan, the focus has been on phased-in LAM training of all public, clinic-based maternal and child health service providers. Service statistics were analyzed to determine LAM user rates—the proportion of all women of reproductive age (not just those who are less than 6 months postpartum) who use LAM as a method of birth spacing. User rates were 0.1 percent at baseline (1999) and increased to 4.5 percent two years later. Due to the tendency of the LAM user rate to underestimate actual trends, this increase is more dramatic than it appears. Based on the Jordan project's success to date, the Ministry of Health is establishing a National Maternal and Child Health Breastfeeding/LAM Resource and Training Center, supported in part by LINKAGES and USAID.

Policy and Advocacy

Understanding the specific context in which organizations receive funding and design projects is critical to overcoming constraints and identifying opportunities for integrating LAM into family planning services. In March 2002, LINKAGES convened a policy meeting with senior technical officers from USAID's Office of Population. The purpose of the meeting was to define policy and program interventions that USAID could promote to further the mainstreaming of LAM into USAID's portfolio of reproductive health projects. Since then, EngenderHealth, Catalyst and ADVANCE have committed to incorporate LAM interventions into their program portfolios. One of the first activities of this commitment will be the inclusion and tracking of LAM indicators in project workplans. LINKAGES will continue to foster this mainstreaming effort.

Applied Research

LINKAGES is in the process of conducting a retrospective study of its country programs in Jordan and Bolivia to evaluate the impact LAM has had on postpartum family planning use. The hypothesis of this study is that among women who did not use a modern family planning method before their last pregnancy, LAM users are more likely than non-LAM users to use a modern family planning method at 6 and 12 months postpartum. A descriptive analysis examining the characteristics of women who choose LAM will also be included in the study.

Initial findings will be available in late 2003.

Technical and Program Information

LINKAGES disseminates an interactive, multimedia CD for program planners on LAM that contains information gathered from a variety of projects and organizations around the world. The CD includes

- LAM advocacy presentation
- LAM training modules
- IEC materials for LAM behavior change
- Monitoring and evaluation materials
- LAM bibliography with abstracts
- Background publications on LAM, including LINKAGES' FAQ Sheet on LAM

LINKAGES' training module, "LAM: A Postpartum Contraceptive Method for Women Who Breastfeed", employs a participatory training approach geared towards practical responses to problem solving and questions related to difficulties encountered by service providers promoting and women using LAM. Role-plays, small and large group activities, lectures, and a 2–4 hour clinical and community counseling practicum make up this 13-hour module.

Related LINKAGES and other publications

- World LINKAGES/Jordan (2002)
- World LINKAGES/Bolivia (2002)
- World LINKAGES/Madagascar (2002)
- LAM Interactive Multimedia CD (2002)
- Frequently Asked Questions on LAM (2001)
- Breastfeeding: Protecting a Natural Resource (Institute for Reproductive Health, 1995)
- Guidelines: Breastfeeding, Family Planning, and the Lactational Amenorrhea Method (Institute for Reproductive Health, 1994)

For more information on LAM and LINKAGES' information products, visit www.linkagesproject.org or contact linkages@aed.org